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## BIB DATA SHEET

CONFIRMATION NO. 4413

<b>SERIAL NUMBER</b> 09/815,341	<b>FILING or 371(c) DATE</b> 03/22/2001 <b>RULE</b>	<b>CLASS</b> <del>485</del> 702	<b>GROUP ART UNIT</b> 1631	<b>ATTORNEY DOCKET NO.</b> BBC-069		
<b>APPLICANTS</b> Nancy J. Bump, Lowell, MA; Lee D. Arnold, Westborough, MA; Richard W. Dixon, Jefferson, MA; Hans Wolfgang Heoffken, Ludwigshafen, GERMANY; Karen Allen, Weston, MA; Cornelia Bellamacina, Castro Valley, CA;						
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/192,920 03/29/2000						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/16/2001						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and / Carolyn Smith / Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance CS Initials	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWINGS</b> 171	<b>TOTAL CLAIMS</b> 85	<b>INDEPENDENT CLAIMS</b> 81
<b>ADDRESS</b> Gayle B. O'Brien Abbott Bioresearch Center 100 Research Drive Worcester, MA 01605-4314 UNITED STATES						
<b>TITLE</b> Method of identifying inhibitors of Tie-2						
<b>FILING FEE RECEIVED</b> 2514	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		